									Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003									10686782					
CLAIMS AS FILED - PART I (Column 1) (Column 2)										πην ⊐	OTHER THAN OR SMALL ENTITY			
T	OTAL CLAIMS	; 	ما				ŀ	RATE F		FEE	1	RATE	FEE	
FC	DR .		NUMBER FILED		NUMBER EXTRA			BASIC FEE 385.00		385.00	OR	BASIC FEE	770.00	
ΤC	OTAL CHARGE	ABLE CLAIMS	minus 20=		• /			X\$ 9	.		OR	X\$18=		
INDEPENDENT CLAIMS			= 2 suninus 3					X43=				X86=		
ML	ULTIPLE DEPE	NDENT CLAIM P	RESENT	RESENT						··········	OR			
1.	the difference	e in column 1 is	less than zero, enter		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	column 2	+145=		4		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2 CLAIMS AS AMENDED - PART II								TOTA	L		OR	TOTAL	770	
		(Column 1)				(Column 3)	_	SMALL ENTITY		NTITY	OR	OTHER SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
Š Š	Total	. 16	Minus	- /	3 0	-0		X\$ 9=	T		OB	_X\$18=		
ME	Independent	. 3	Minus	***	3			X43=	t	$\overline{}$	OR	X86= ~	=	
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							11AE	1			+290=		
1, 10 1 11								+145=			OR	+29U=		
	(Column 1) (Column 2) (Column 3)									ADDIT. FEEOR ADDIT. FEE				
_		(Column 1) CLAIMS	Γ	HIGH	EST	(Column 3)	ľ		-	ADDI-			ADDI	
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIO PAID I	USLY	PRESENT EXTRA		RATE		IONAL FEE		RATE	ADDI- TIONAL FEE	
Ž	Total	<u> </u>	Minus	**		=	lĺ	X\$ 9=		7	OR	X\$18=		
AME	Independent	•	Minus	A+A		- -		X43=	1	\neg	OR	X86≖		
ت	rins i PRESE	NTATION OF MI	ILIIPLE DEF	ENDENT	CLAIM		ıţ	+145=	1			+290=		
									╬		OR	1290= 101AL		
(Oakuma d)								ODIT. FE		i	OR,	ODIT. FEE		
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST														
DMENT C	<u>-</u>	REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	TI	ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		= .	[X\$ 9=	T		OR	X\$18=		
AME	Independent	•	Minus	***		#		X43=	十			X86≈		
Ш	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.														
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." TOTAL ADDIT, FEE OP ADDIT														
_ i	The "Highest Num	ber Previously Pak	For (Total or	Independe	nt) is the	highest number	four	nd in the a	ppro	priate box	i n colu	IMN 1.		

FORM PTO-875 (Rev. 10/03)

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